P18CCCC GGG

(Requestor's Name)
(Address)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

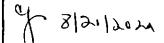
Office Use Only



800388604278

00/07/22--01024 -023 **25.00





COVER LETTER

Division of Corporations NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: at (<u>CH6</u>) <u>369-5111</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: X \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation of
SASHA SKYY P.A.
(Name of Corporation as currently filed with the Florida Pept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". I professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florida street address)
New Registered Office Address:, Florida
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	-		
X Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u> Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	Alan Skyy	3502 Henderson Blue Tampa FL 33609
Add		,	Jampa FL 33609
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		-	<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	_		_	
	L-7411				

		. /			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		/		1	
		1	-/-//		
	/	+	///-}	·····	
			1 #1		
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	+		
/		1			
			•		
	1 . '6		altaria artisas dalka		
f an amendment provides for an exchi- provisions for implementing the amer	ange, reciassinc	ation, or canc ntained in the	amendment itself:	ares,	
(if not applicable, indicate N/A)					
	···•				
				····	
				•	
	<u>.</u>				

: The date of eac	ch amendment(s)	adoption:				, if other than
date this docum	nent was signed.		_			
Effective date	if applicable:		June	1,2022		
			(no more than !	M days after amena	lment file date)	
	ate inserted in this ective date on the			cable statutory filir	ng requirements,	this date will not be listed as
Adoption of A	mendment(s)	(<u>CH</u>	IECK ONE)			
The amenda action was a		dopted by the	incorporators, or	board of directors	without sharehold	ler action and shareholder
	nent(s) was/were a cholders was/were			ne number of votes of	east for the amend	dment(s)
				rough voting groups vote separately on		
"The r	number of votes ca	st for the amer	ndment(s) was/w	ere sufficient for ap	proval	
by					•-	
		(vot	ting group)		 -	
	D. J	(1	10	1		
	Dated	6-1-	101	/		
	Signature	On	m my			
				icer – if directors or he hands of a receiv		
			y by that fiduciary		er, musice, or our	er court
			Sus	ha Skw		
			(Typed or printed	name of person sig	ning)	
			Register	ed Agent	/owner/	Manager
		((Title of person si		-	\bigcup

the

the